Boyd K. Rutherford *Lt. Governor* 



Rona E. Kramer *Secretary* 

## DEPARTMENT OF AGING

# Long-Term Care Ombudsman Program FACT SHEET June 2018

Authority: Annotated Code of Maryland, Human Services Article, Title 10, Subtitle 9; Older Americans Act, including 42 U.S.C. § 3058g

Protecting the rights and promoting the wellbeing of residents of long-term care facilities

# The Ombudsman Program serves 49,000+ people in 226 Nursing Homes and 1,509 Assisted Living Facilities through:

- The Office of the State Long-Term Care Ombudsman at the Maryland Department of Aging with a State Ombudsman and Ombudsman Specialist
- 19 Local Offices (34 FTEs) located in Area Agencies on Aging
- 167 volunteers (100 designated) donating over 11,000 hours

#### In FY17, the Long-Term Care Ombudsman Program provided:

- 3984 Quarterly Facility visits
- 8109 Consultations to individuals
- 277 Community Ed. Sessions
- 639 Meetings with resident councils
- 4238 Complaints addressed
- 3735 Consultations to facilities
- 78 Meetings with family councils
- 228 Participation in facility surveys

#### Sources of complaints:

- Residents 44%
- Relative/Friend 34%

- Anonymous 6%
- Facility/Staff 6%
- Other Non relative guardian, bankers, clergy, public officials, other agencies

### Most frequent complaints handled in Nursing Homes:

- 1. Discharge/eviction planning, notice, procedures, abandonment
- 2. Failure to respond to requests for assistance call bells, etc
- 3. Care plan/resident assessment inadequate, failure to follow plan or physician's orders, Medications administration, organization
- 4. Dignity, respect staff attitudes
- 5. Personal Hygiene includes nail care and oral hygiene, dressing and grooming
- 6. Symptoms unattended, including pain, pain not managed, no notice to others of change in condition
- 7. Exercise preference/choice and/or civil/religious rights, individual's right to smoke
- 8. Food service quantity, quality, variation, choice, condiments, utensils, menu
- Accidents or injury of unknown origin, falls, improper handling, Assistive devices or equipment
- 10. Pressure Sores, not turned

#### Most frequent complaints handled in Assisted Living Facilities:

- 1. Discharge/ Eviction Discharge/eviction planning, notice, procedures, abandonment
- 2. Medications- administration, organization
- 3. Food service quantity, quality, variation, choice, condiments, utensils, menu
- 4. Accidents or injury of unknown origin, falls, improper handling, Dignity, respect staff attitudes
- 5. Exercise preference/choice and/or civil/religious rights, individual's right to smoke
- 6. Personal Hygiene includes nail care and oral hygiene, dressing and grooming
- 7. Personal funds mismanaged, access/information denied, deposits and other money not returned, Cleanliness, pests, general housekeeping
- 8. Equipment/building disrepair, hazard, poor lighting, fire safety, not secure
- 9. Abuse, physical (including corporal punishment)
- 10. Failure to respond to requests for assistance call bells, etc

#### **Program Information:**

The Long-Term Care Ombudsman Program provides individual and systemic advocacy for those who live in nursing home and assisted living facilities. Federal and State laws guide the Program and give it its authority.

The Ombudsman Program works throughout the state and country to protect the rights and promote the wellbeing of residents who are oftentimes medically fragile, vulnerable, and isolated.

All ombudsmen must complete orientation and training, and be free of any conflict of interest. Volunteer ombudsmen are also mentored by an experienced ombudsman to conduct facility visits and receive additional training to resolve complaints before becoming designated.

Ombudsmen throughout the state respond to grievances with the goal to resolve them at the lowest possible level based on the wishes/needs of the resident. Ombudsmen seek to empower residents, their family members, and resident representatives to better understand the long-term care system and address their issues using a variety of strategies. Ombudsmen may act with or on behalf of residents. Actions taken by ombudsmen are guided by the resident or resident representative.

Confidentiality is central to ombudsman work. No names or identifying information are released without permission.

Ombudsmen are proactive, working to prevent neglect, abuse and to promote residents' rights. They provide staff training, educational forums, work with resident and family councils, and are involved in local, county and statewide discussions that address policies related to long-term care.

#### **State Ombudsman Goals:**

- 1) Provide the resources needed to ensure that the Maryland Long-Term Care Ombudsman Program is operated consistently with Older American's Act provisions and operating consistently within and between the local ombudsman programs.
- 2) Advocate with and on behalf of Maryland residents who live in long-term care facilities.
- 3) Promote quality of care <u>and</u> quality of life for residents including those with dementia through training, consultations, highlighting successful practices, and public policies that support person-centered care.

This Fact Sheet summarizes the FY17 (October 1, 2016 – September 30, 2017) data submitted to the Administration for Community Living. For more information, contact Stevanne Ellis, State Long-Term Care Ombudsman, stevanne.ellis@maryland.gov, or 1-800-243-3425 (toll free in Maryland) or 410-767-1100.